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## BIB DATA SHEET

CONFIRMATION NO. 2315

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/538,515	09/12/2007	604	3771	12684.15USWO		
<b>RULE</b>						
<b>APPLICANTS</b> Robert Waldner, Peiting, GERMANY; Daniela Mundenbruch, Munchen, GERMANY; Uwe Hetzer, Munchen, GERMANY; Markus Urich, Munchen, GERMANY;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/13959 12/09/2003      yes /rty/						
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 10257381.6 12/09/2002      yes /rty/						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/04/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/RACHEL T YOUNG/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> MERCHANT & GOULD PC P.O. BOX 2903 MINNEAPOLIS, MN 55402-0903 UNITED STATES						
<b>TITLE</b> Inhalation Therapy Device						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		